
TESTA, HURWITZ & THIBEAULT, LLP

ATTORNEYS AT LAW

HIGH STREET TOWER, 125 HIGH STREET
BOSTON, MASSACHUSETTS 02110

OFFICE (617) 248-7000

FAX (617) 248-7100

T E L E C O P Y C O V E R S H E E T

Date: June 9, 2003

TO: **Name:** Patent Examiner Carla J. Myers

Address: U.S. Patent and Trademark Office

Group Unit: 1634

Fax: (703) 746-5042

FROM: **Sender Name:** Jeremy P. Occek (Reg. No. 50,794)

Telephone: (617) 310-8158

No. of Pages: 26 (including cover sheet)

Re: U.S.S.N. 09/928,102

COMMENTS:

See attached.

This facsimile is subject to attorney-client privilege and contains confidential information intended only for the person(s) named above. If you have received this facsimile in error, please notify us immediately by telephone and destroy the original transmission without making a copy.

Sent By _____ Date Sent June 9, 2003 Time Sent _____

2504905

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Perls *et al.* DOCKET NO.: BIT-001 (1538/47)
SERIAL NO.: 09/928,102 GROUP NO.: 1634
FILING DATE: August 10, 2001 EXAMINER: Carla J. Myers
TITLE: GENETIC LOCI INDICATIVE OF PROPENSITY FOR LONGEVITY
AND METHODS FOR IDENTIFYING PROPENSITY FOR AGE-
RELATED DISEASES

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any documents referred to as attached hereto, are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 746-5042 on this 9th day of June, 2003.


Jeremy P. Occek

Attached hereto are:

- (1) Fee Transmittal (1 page);
- (2) Copy of Fee Transmittal (1 page);
- (3) Supplemental Information Disclosure Statement (2 pages);
- (4) Form PTO-1449 (1 page); and
- (5) Copies of references C31-C32.

2636993

FEE TRANSMITTAL FY 2003		Complete if Known	
		Application Serial Number	09/928,102
		Filing Date	August 10, 2001
		First Named Inventor	Perls
		Group Art Unit	1634
		Examiner Name	Carla J. Myers
		Attorney Docket No.	BYT-001

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																
<p>1. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p>2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input type="checkbox"/> Overpayment Credit.</p> <p>3. <input checked="" type="checkbox"/> Applicant claims small entity status.</p>	<p>3. ADDITIONAL FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Large Entity Fee (\$)</th> <th style="text-align: center;">Small Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: center;">Fee Paid</th> </tr> </thead> <tbody> <tr><td style="text-align: center;">130</td><td style="text-align: center;">65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td style="text-align: center;">50</td><td style="text-align: center;">25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td style="text-align: center;">130</td><td style="text-align: center;">130</td><td>Non-English specification</td><td></td></tr> <tr><td style="text-align: center;">2,520</td><td style="text-align: center;">2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td style="text-align: center;">110</td><td style="text-align: center;">55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td style="text-align: center;">410</td><td style="text-align: center;">205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td style="text-align: center;">930</td><td style="text-align: center;">465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td style="text-align: center;">1450</td><td style="text-align: center;">725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td style="text-align: center;">1970</td><td style="text-align: center;">985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td style="text-align: center;">320</td><td style="text-align: center;">160</td><td>Notice of Appeal</td><td></td></tr> <tr><td style="text-align: center;">320</td><td style="text-align: center;">160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td style="text-align: center;">280</td><td style="text-align: center;">140</td><td>Request for oral hearing</td><td></td></tr> <tr><td style="text-align: center;">130</td><td style="text-align: center;">130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td style="text-align: center;">180</td><td style="text-align: center;">180</td><td>Submission of Information Disclosure Statement</td><td style="text-align: center;">180.00</td></tr> <tr><td style="text-align: center;">750</td><td style="text-align: center;">375</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td style="text-align: center;">750</td><td style="text-align: center;">375</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td style="text-align: center;">100</td><td style="text-align: center;">100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td colspan="4">Other fee (Specify) _____</td></tr> <tr><td colspan="4">Other fee (Specify) _____</td></tr> </tbody> </table>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		410	205	Extension for reply within second month		930	465	Extension for reply within third month		1450	725	Extension for reply within fourth month		1970	985	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement	180.00	750	375	Filing a submission after final rejection (37 CFR 1.129(a))		750	375	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify) _____				Other fee (Specify) _____			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																														
130	65	Surcharge - late filing fee or oath																																																																															
50	25	Surcharge - late provisional filing fee or cover sheet																																																																															
130	130	Non-English specification																																																																															
2,520	2,520	Request for ex parte reexamination																																																																															
110	55	Extension for reply within first month																																																																															
410	205	Extension for reply within second month																																																																															
930	465	Extension for reply within third month																																																																															
1450	725	Extension for reply within fourth month																																																																															
1970	985	Extension for reply within fifth month																																																																															
320	160	Notice of Appeal																																																																															
320	160	Filing a brief in support of an appeal																																																																															
280	140	Request for oral hearing																																																																															
130	130	Petitions to the Commissioner																																																																															
180	180	Submission of Information Disclosure Statement	180.00																																																																														
750	375	Filing a submission after final rejection (37 CFR 1.129(a))																																																																															
750	375	For each additional invention to be examined (37 CFR 1.129(b))																																																																															
100	100	Certificate of Correction for applicant's error																																																																															
Other fee (Specify) _____																																																																																	
Other fee (Specify) _____																																																																																	
<p style="text-align: center;">FEE CALCULATION</p> <p>1. FILING FEE</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Large Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: center;">Fee Paid</th> </tr> </thead> <tbody> <tr><td style="text-align: center;">750</td><td>Utility filing fee</td><td></td></tr> <tr><td style="text-align: center;">330</td><td>Design filing fee</td><td></td></tr> <tr><td style="text-align: center;">160</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Number Filed</th> <th style="text-align: center;">Number Extra</th> <th style="text-align: center;">Rate</th> <th style="text-align: center;">Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Total Claims</td> <td style="text-align: center;">- 20 =</td> <td style="text-align: center;">x \$ 18.00 =</td> <td></td> </tr> <tr> <td style="text-align: center;">Independent Claims</td> <td style="text-align: center;">- 3 =</td> <td style="text-align: center;">x \$ 84.00 =</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td style="text-align: center;">\$280.00 =</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: center;">(\$)</td> </tr> </tbody> </table> <p>2. AMENDMENT CLAIM FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Claims Remaining After Amend.</th> <th style="text-align: center;">Highest No. Previously Paid For</th> <th style="text-align: center;">Present Extra</th> <th style="text-align: center;">Rate</th> <th style="text-align: center;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Total</td> <td style="text-align: center;">-</td> <td style="text-align: center;">=</td> <td style="text-align: center;">x \$ 18.00 =</td> <td></td> </tr> <tr> <td style="text-align: center;">Indep.</td> <td style="text-align: center;">-</td> <td style="text-align: center;">=</td> <td style="text-align: center;">x \$ 84.00 =</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td style="text-align: center;">+ \$280.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td style="text-align: center;">(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td style="text-align: center;">(\$)</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: center;">(\$)</td> <td></td> </tr> </tbody> </table>	Large Entity Fee (\$)	Fee Description	Fee Paid	750	Utility filing fee		330	Design filing fee		160	Provisional filing fee		Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =	x \$ 18.00 =		Independent Claims	- 3 =	x \$ 84.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$280.00 =	TOTAL:				SMALL ENTITY DISCOUNT:				SUBTOTAL (1)			(\$)	Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 18.00 =		Indep.	-	=	x \$ 84.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =		TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)			(\$)		<p style="text-align: right;">SUBTOTAL (3) (\$ 180.00)</p> <p style="text-align: right;">SUBTOTAL (1) 0.00</p> <p style="text-align: right;">SUBTOTAL (2) 0.00</p> <p style="text-align: right;">SUBTOTAL (3) 180.00</p> <p style="text-align: right;">TOTAL (\$ 180.00)</p>					
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																															
750	Utility filing fee																																																																																
330	Design filing fee																																																																																
160	Provisional filing fee																																																																																
Number Filed	Number Extra	Rate	Amount																																																																														
Total Claims	- 20 =	x \$ 18.00 =																																																																															
Independent Claims	- 3 =	x \$ 84.00 =																																																																															
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$280.00 =																																																																														
TOTAL:																																																																																	
SMALL ENTITY DISCOUNT:																																																																																	
SUBTOTAL (1)			(\$)																																																																														
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																													
Total	-	=	x \$ 18.00 =																																																																														
Indep.	-	=	x \$ 84.00 =																																																																														
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =																																																																														
TOTAL:				(\$)																																																																													
SMALL ENTITY DISCOUNT:				(\$)																																																																													
SUBTOTAL (2)			(\$)																																																																														
<p style="text-align: center;">CORRESPONDENCE ADDRESS</p> <p>Direct all correspondence to:</p> <p style="text-align: center;">Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100</p>	<p style="text-align: center;">SIGNATURE BLOCK</p> <p style="text-align: center;">Respectfully submitted,</p> <p style="text-align: center;"><i>Jeremy P. Ozek</i> Jeremy P. Ozek Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110</p> <p>Date: June 9, 2003 Reg. No.: 50,794 Tel. No.: (617) 310-8158 Fax No.: (617) 248-7100</p>																																																																																

2637120

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): *Perls et al.* DOCKET NO.: BIT-001 (1538/47)
SERIAL NO.: 09/928,102 GROUP NO.: 1634
FILING DATE: August 10, 2001 EXAMINER: Carla J. Myers
TITLE: GENETIC LOCI INDICATIVE OF PROPENSITY FOR LONGEVITY
 AND METHODS FOR IDENTIFYING PROPENSITY FOR AGE-
 RELATED DISEASES

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.97 and 1.98, Applicants hereby make of record the publications listed on the accompanying Form PTO-1449, and other information contained herein, for consideration by the Examiner in connection with the examination of the above-identified patent application. Copies of the publications are enclosed (C31-C32).

REMARKS

In accordance with the provisions of 37 C.F.R. 1.97, this statement is being filed after the mailing date of a final action or notice of allowance but before the payment of the issue fee, AND the requisite Statement is below, AND the requisite petition fee under 37 C.F.R. 1.17(p), namely \$180.00 is included herein. It is respectfully requested that each of the publications listed on the attached Form PTO-1449, and other information contained herein, be made of record in this application.

Supplemental Information Disclosure Statement
Serial No. 09/928,102
Page 2 of 2

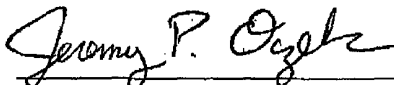
STATEMENT

As required under 37 C.F.R. 1.97(e), Applicants, through the undersigned, hereby state either that no item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing this Statement after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to any individual designated in 37 C.F.R. 1.56(e) more than three months prior to the filing of the Information Disclosure Statement.

Respectfully submitted,

Date: June 9, 2003
Reg. No. 50,794

Tel. No.: (617) 310-8158
Fax No.: (617) 248-7100



Jeremy P. Ocze
Attorney for Applicants
Testa, Hurwitz, & Thibault, LLP
High Street Tower
125 High Street
Boston, Massachusetts 02110

2636998

SHEET 1 OF 1

FORM PTO - 1449				ATTORNEY DOCKET NO.: BIT-001 (1538/47)					
SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT				APPLICANT(S): Perls et al.					
				SERIAL NO.: 09/928,102					
				FILING DATE: August 10, 2001					
				GROUP: 1634					
U.S. PATENT DOCUMENTS									
EXAM. INIT.		DOCUMENT NUMBER	DATE	NAME	CLASS	SUB CLASS	FILING DATE IF APPROPRIATE		
FOREIGN PATENT DOCUMENTS									
EXAM. INIT.		DOCUMENT NUMBER	DATE	COUNTRY CODE	CLASS	SUB CLASS	FILING DATE	ABSTRACT ONLY	ENGLISH LANG (Y/N)
OTHER ART, JOURNAL ARTICLES, ETC.									
EXAM. INIT.	OTHER DOCUMENTS: (Including Author, Title, Date, Relevant Pages, Place of Publication)								
	C31	Austin et al., "Candidate-Gene Studies of the Atherogenic Lipoprotein Phenotype: A Sib-Pair Linkage Analysis of DZ Women Twins," <u>The American Society of Human Genetics</u> , Vol. 62 (1998), pages 406-419.							
	C32	Rainwater et al., "A Genome Search Identifies Major Quantitative Trait Loci on Human Chromosomes 3 and 4 That Influence Cholesterol Concentrations in Small LDL Particles," <u>Journal of the Department of Genetics</u> , (1998), pages 777-783.							
EXAMINER					DATE CONSIDERED				

2636995